



MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY
DATAMASTER MAINTENANCE REPORT

BATH ALCOHOL PROGRAM

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN 204098 DATE OF INSPECTION 05-31-2009

LOCATION OF INSTRUMENT (STREET AND CITY) SHELBY COUNTY SHERIFF'S OFFICE, 100 E. MAIN SHELBYVILLE, MO. TIME OF INSPECTION 1901 HRS

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

☒ DIAGNOSTIC CHECK (PRINTOUT ATTACHED)

☒ COMPUTER

☒ DETECTOR

☒ PROGRAM

☒ FILTERS

☒ HEATERS SAMPLE CHAMBER 49 °C

☒ QUARTZ STANDARD

☒ FLOW DETECTOR

☒ CALIBRATION

☒ PUMP HIGH SPEED

☒ PRINTER

☒ INDICATOR LIGHTS

☒ TIME AND DATE

☒ SIMULATOR TEMPERATURE (34 °C ± 0.2°C)

☒ CALIBRATION CHECK -

Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)

☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE

☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

TEST 1 102

TEST 2 102

TEST 3 102

☒ PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

☒ NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)

REFUSALS 0 (0-.04) 1 (.05-.09) 3 (.10-.14) 2 (.15-.19) 2 (Over .19) 1

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

INSTRUMENT MEETS DHS REQUIREMENTS.

BOTH LABORATORIES LOT #08340 BOTTLE #916 EXP. 10-15-2009

INV. #127232

INSPECTING OFFICER

SIGNATURE TAR [Signature] #123

PRINT NAME E. F. BROWN

TYPE II PERMIT NUMBER/EXPIRATION DATE 820056/02-25-2010

TELEPHONE NUMBER 660.385.2132



GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **08340** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain **0.1211** percent (w/vol) ethyl alcohol. The expiration date for this lot number is **October 15, 2009** at 11:59 PM.

When used in a calibrated Simulator, operating at $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$, this solution will give a breath alcohol analysis instrument reading of **0.10** percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204090
05/31/09

TESTING OFFICER:

BROWN/E/F

OFFICER I.D.: 173

PERMIT NUMBER: 820056

EXPIRATION DATE: 02/25/10

MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	19:00
INTERNAL STANDARD	VERIFIED	19:00
EXTERNAL STANDARD	.102	19:00
BLANK TEST	.000	19:00
EXTERNAL STANDARD	.102	19:00
BLANK TEST	.000	19:10
EXTERNAL STANDARD	.102	19:10
BLANK TEST	.000	19:11

N = 3

SIM. = .1

AVG. = .102

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204090
05/31/09
19:01

--- DIAGNOSTIC CHECK ---

COMPLITER:	OKAY
PROGRAM:	OKAY
HEATERS	
SAMPLE CHAMBER:	49c
FLOW DETECTOR:	OKAY
PUMP	
HIGH SPEED:	OKAY
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STANDARD:	OKAY
CALIBRATION:	OKAY

PRINTER TEST

!"#\$%&'()*+,-./0123456789:;<=>?@ABCDEFGHI
HIJKLMNOPQRSTUVWXYZ[\]^_`abcde fghijklmno
pqrstu vwxyz{|}~"

Operator Signature

TR *[Signature]* #173

Operator Signature

TR *[Signature]* #173

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204090
05/31/09

ARREST TIME: 19:00

SUBJECT NAME:

TEST

DOR: 01/01/01 SEX: M

STATE/D.L.: MO/TEST

ARRESTING OFFICER:

TEST

OFFICER I.D.: 173

TESTING OFFICER:

BROWN/E/F

OFFICER I.D.: 173

PERMIT NUMBER: 820056

EXPIRATION DATE: 02/25/10

MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

RADIO INTERFERENCE

Operator Signature

TH. *[Signature]* #13

State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



E.F. BROWN

Is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

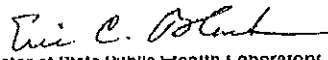
for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

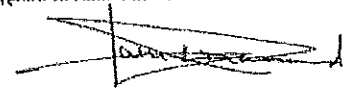
Date 02/25/08

Number 820056

Expires 02/25/2010

MO 680-0771 (7-88)


Director of State Public Health Laboratory


Director, Department of Health

Lab. 4 (R7-88)